

County: Sheboygan

Facility ID: 5490

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MEADOW VIEW MANOR NURSING HOME

3613 SOUTH 13TH STREET

SHEBOYGAN 53081 Phone: (920) 458-4040

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 74

Total Licensed Bed Capacity (12/31/03): 74

Number of Residents on 12/31/03: 73

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 72

Corporation

Skilled

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		19.2
Supp. Home Care-Personal Care	No					1 - 4 Years		43.8
Supp. Home Care-Household Services	No	Developmental Disabilities	1.4	Under 65	8.2	More Than 4 Years		9.6
Day Services	No	Mental Illness (Org./Psy)	19.2	65 - 74	12.3			----
Respite Care	No	Mental Illness (Other)	6.8	75 - 84	35.6			72.6
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	37.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.4	95 & Over	6.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.7		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	4.1		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	30.1	65 & Over	91.8	-----		
Transportation	No	Cerebrovascular	11.0		-----	RNs		12.0
Referral Service	No	Diabetes	6.8	Gender	%	LPNs		3.8
Other Services	No	Respiratory	5.5		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	11.0	Male	30.1	Aides, & Orderlies		
Mentally Ill	No		----	Female	69.9			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

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## Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	14	100.0	232	34	94.4	118	0	0.0	0	22	100.0	167	0	0.0	0	1	100.0	430	71	97.3
Intermediate	---	---	---	2	5.6	99	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.7
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	14	100.0		36	100.0		0	0.0		22	100.0		0	0.0		1	100.0		73	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	30.8	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0	75.3	24.7	73
Other Nursing Homes	1.1	Dressing	5.5	68.5	26.0	73
Acute Care Hospitals	60.4	Transferring	9.6	69.9	20.5	73
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	5.5	63.0	31.5	73
Rehabilitation Hospitals	0.0	Eating	58.9	34.2	6.8	73
Other Locations	7.7	*****				
Total Number of Admissions	91	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	9.6		Receiving Respiratory Care	2.7
Private Home/No Home Health	12.0	Occ/Freq. Incontinent of Bladder	49.3		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	18.5	Occ/Freq. Incontinent of Bowel	24.7		Receiving Suctioning	0.0
Other Nursing Homes	10.9				Receiving Ostomy Care	0.0
Acute Care Hospitals	13.0	Mobility			Receiving Tube Feeding	1.4
Psych. Hosp.-MR/DD Facilities	1.1	Physically Restrained	2.7		Receiving Mechanically Altered Diets	17.8
Rehabilitation Hospitals	0.0					
Other Locations	5.4	Skin Care			Other Resident Characteristics	
Deaths	39.1	With Pressure Sores	12.3		Have Advance Directives	80.8
Total Number of Discharges		With Rashes	4.1		Medications	
(Including Deaths)	92				Receiving Psychoactive Drugs	83.6

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97.3	86.2	1.13	87.1	1.12	88.1	1.10	87.4	1.11
Current Residents from In-County	91.8	78.5	1.17	81.0	1.13	82.1	1.12	76.7	1.20
Admissions from In-County, Still Residing	34.1	17.5	1.95	19.8	1.72	20.1	1.69	19.6	1.73
Admissions/Average Daily Census	126.4	195.4	0.65	158.0	0.80	155.7	0.81	141.3	0.89
Discharges/Average Daily Census	127.8	193.0	0.66	157.4	0.81	155.1	0.82	142.5	0.90
Discharges To Private Residence/Average Daily Census	38.9	87.0	0.45	74.2	0.52	68.7	0.57	61.6	0.63
Residents Receiving Skilled Care	97.3	94.4	1.03	94.6	1.03	94.0	1.03	88.1	1.10
Residents Aged 65 and Older	91.8	92.3	0.99	94.7	0.97	92.0	1.00	87.8	1.05
Title 19 (Medicaid) Funded Residents	49.3	60.6	0.81	57.2	0.86	61.7	0.80	65.9	0.75
Private Pay Funded Residents	30.1	20.9	1.44	28.5	1.06	23.7	1.27	21.0	1.44
Developmentally Disabled Residents	1.4	0.8	1.71	1.3	1.08	1.1	1.24	6.5	0.21
Mentally Ill Residents	26.0	28.7	0.91	33.8	0.77	35.8	0.73	33.6	0.77
General Medical Service Residents	11.0	24.5	0.45	21.6	0.51	23.1	0.47	20.6	0.53
Impaired ADL (Mean)	53.4	49.1	1.09	48.5	1.10	49.5	1.08	49.4	1.08
Psychological Problems	83.6	54.2	1.54	57.1	1.46	58.2	1.44	57.4	1.46
Nursing Care Required (Mean)	4.8	6.8	0.71	6.7	0.71	6.9	0.69	7.3	0.65